

United States of America
Department of Transportation — Federal Aviation Administration
Supplemental Type Certificate

Number SA3605SW

Project 150-107
MMC-150

This certificate, issued to Weir Aircraft Service, Inc.
P. O. Box 987
Mineral Wells, Texas 76067

certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 3 of the Civil Air Regulations.

Original Product — Type Certificate Number: A5SW
Make: Fairchild
Model: SA26-T, SA26-AT

Description of Type Design Change:

Installation of fuel level measuring sticks in lower wing access panel outboard of nacelles in accordance with Weir Aircraft Service Drawing No. 001 dated 11/22/85, Drawing No. 002 dated 11/22/85, Drawing No. 003 dated 4/2/86, Drawing No. 004 dated 4/2/86, and Drawing No. 005 dated 4/2/86, or later FAA approved revision.

Limitations and Conditions:

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: November 22, 1985

Date reissued:

Date of issuance: April 18, 1986

Date amended:



By direction of the Administrator

C. L. Andriesen
for L. B. Andriesen (Signature)

Acting Manager, Aircraft Certification
Division

Southwest Region (Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____

(Number and street)

(City, State, and ZIP code)

from *(Name of grantor)* *(Print or type)* _____

(Address of grantor) _____

(Number and street)

(City, State, and ZIP code)

Extent of Authority (if licensing agreement): _____

Date of Transfer: _____

Signature of grantor *(In ink)*: _____